SUPPLEMENT
TO THE
BRITISH MEDICAL JOURNAL.

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INSURANCE.

CORRESPONDENCE.

MEDICAL REMUNERATION UNDER THE INSURANCE ACTS.

DR. SAMUEL CRAWSHAW (Ashton-under-Lyne) writes: There is undeniably throughout the country a feeling of unrest and dissatisfaction on the part of panel practitioners with the conditions of their work under the Insurance Act. It seems to me that this unrest can be traced to the unsatisfactory nature of our agreement in one respect. It is between the Insurance Committee of a county or county borough on the one hand and the individual practitioner on the other. Wherever the Commissioners are referred to in that agreement it is in the light of a judicial committee appointed to hold the balance between the two parties to the agreement. Yet it is obvious, from the recently published Memorandum on the remuneration of medical practitioners, that they are the real paymasters; but they delegate this duty to the Insurance Committees, so that it gives them a free hand to alter the conditions of our service as and when they may think fit. They are like a god sitting up aloft looking serenely on the common affairs of panel practitioners, ever ready to punish any laxity in the carrying out of old duties and never hesitating to impose new ones.

In my opinion we shall not cease to have friction in our work until the Commissioners are made parties to the agreement. The agreement should be made directly between us and them without the intervention of the Insurance Committees. Until this is done it is not much use fighting about details. Let the agreement with them be signed yearly, and then we are in a position to bargain with some chance of success.

My advice at the present moment is that we should make this our platform. Let every Local Medical and Panel Committee throughout the country consider this matter and decide to fight for it, and, if necessary, force the matter by the judicious use of the signed resignations of the members. Let us go for this thing now; we can get the rest afterwards, as it will give us power, and we have none at present.

DR. T. ARCHIBALD DUKES (Croydon) writes: The Insurance Commissioners have published a nineteen-page "Memorandum explanatory of the system of remunerating medical practitioners" (Memo. 229/I.C.), reprinted in the BRITISH MEDICAL JOURNAL SUPPLEMENT, October 14th, 1916.

Now we can prove from their own words that the panel profession is underpaid. The references, unless otherwise stated, are to this Memorandum.

The Commissioners admit (§ 65) that "the arrangement is in effect a contract of insurance under which the doctor undertakes a definite liability for a premium calculated in advance."

Yet they declare (§§ 22, 8, 15, 18): "The object of all their calculations is to arrive at . . . the exact number of days for which the doctors and chemists were at risk in respect of each insured person, and to pay . . . $\frac{1}{365}$th of 8s. 6d. for . . . each insured-person-day into the 'central pool.'"

Fancy suggesting the payment of $\frac{1}{365}$th of your fire insurance premium because your house was burnt down in the first day of the year! To adopt the Commissioners' words (§ 7), "When stated thus explicitly, the proposition is at once seen to be absurd." The whole annual premium is due, even though the house cease to exist long before the year is out. Seven shillings is a very poor payment for attending any one through a fatal illness. The full insurance premium should be paid whether the illness occurs during the first week, the last week, or not at all.

"The undertaking of the Government was (§ 5) that there should be contributed . . . 8s. 6d. per head . . . per annum." Yes, not 8½d. a month, and certainly not a fraction of a farthing a day. Mr. Lloyd George repeatedly promised the doctors that they should receive at least 7s. per annum, or with the floating 6d., 7s. 6d. for each insured person. The official explanatory statement urging doctors to join the panel says (§ 22): "Each practitioner . . . will know definitely that if he has 1,000 insured patients on his list for the year he will receive . . . at least £325." With the tuberculosis 6d., and the floating 6d., "it will be £375."

When doctors had been persuaded to join the panel, the national bargain was quickly broken by offering to pay panel doctors 1s. 9d. "*per quarter* in respect of each person included in the practitioner's list at the end of the quarter" (10/I.C., § 2).

Now the Commissioners pretend to pay us by the day (§§ 18, 22). "Insured-person-days" were never dreamt of in the original national bargain; and the idea (of the Commissioners) (§ 15) of "paying in each day $\frac{1}{365}$th part of 8s. 6d. for every person who was during that day entitled to Medical Benefit" is so absurd that (§ 61) "such an arrangement would only be practicable if it were possible to take an elaborate census nightly of the whole insured population;" . . . and (§ 9) "it cannot have been supposed by any one that this could in fact be done."

Thus do the Commissioners prove that their scheme of payment has nothing whatever to do with the national bargain of insurance.

The effect of their plan is to reduce the annual payment promised by approximately six months' payment for each person who either commences or falls out of benefit. The profession would be much better off if they were honestly paid per head per annum, and suffered straightforward deductions of half a premium for each person who either commenced or lapsed from benefit. We then should be paid something for the permanently disabled, and there would be no excuse for postponing settlement. Now, as an excuse for refusing to make a settlement for many months after the year is finished, the Commissioners plead (§§ 35, 39) the cumbrous complexity of the involved scheme which they have built up as a means of guessing how much money to allow as payment for the doctors.

Why do not the Commissioners say they wish to pay us by the hour, and plead the multitude of clerks and tons of stationery involved in pretending to calculate the fractions of farthings to be credited to the doctors as an excuse for not paying us for years afterwards?

The Commissioners should be reminded that universally

all insurance premiums are paid in advance. At first (10/I.C., § 14) instead of leaving the doctors to starve for a year: "Committees were allowed, should they so desire, to make advance payments to doctors on the panel on account of the sums due to them at the end of the quarter," if the doctors do humbly agree to accept such sums as sufficient. But now the Commissioners claim the right to defer a settlement till "so soon as may be" convenient to themselves after the end of the year. While, nevertheless, to make sure that they shall always have in hand the money to pay in advance, every insured person is compelled to pay for six months without any benefit.

This Memo. 229/I.C. explains a cumbrous system continually changed to produce, for the doctor's payment, as small a sum as possible. For example, the procedure for 1913 (§ 35) is changed halfway through 1914 (§ 37) because in the latter half of that year many healthy insured persons joined the forces. But that is no fair reason under any scheme of insurance for paying the doctors any less to attend to all the sick ones who remained behind. Throughout the method described is incompatible with any honest scheme of insurance. The Commissioners consistently abstain from giving any evidence that even that scheme is in fact worked justly.

They say (§ 28) they do not count for payment those insured persons who have no stamped card in the first half of a year, because (§ 31) the Government Actuary says that they are equivalent to those who have cards and fall out of benefit during the year. We demand an opportunity of checking the facts and figures on which such an opinion is held.

Especially we demand to know the number of insured persons in the country each year; not (§ 40) the number "represented by the amount" which the Commissioners see fit to allow for paying the doctors.

They explain (§ 29) how they avoid counting for payment large numbers of insured persons, so of course they have not enough money to pay for all the insured persons on our lists. In excuse the Commissioners plead (§ 46): "Inflation of the Index Register." Even if those lists be inflated we were promised payment on those lists. It is preposterous to make the inefficiency of insurance officials an excuse for depriving doctors of their promised payment.

Examine their excuse (§ 48): The causes are in the main two, namely:

(*a*) *Plural Index Slips.* Where two or more are issued with the same name and the same address, any committee clerk who did not identify them as belonging to the same person would be grossly incompetent.

(*b*) *Deaths, etc.* All deaths are followed by registration and burial. They can be checked by examining the local cemetery returns. Poor Law officials check their lists by just such means, and avoid any inflation. The Commissioners can show no cause but incompetence for the "inflation." This incompetence belongs chiefly to the Commissioners themselves. By their regulations (§§ 45, 57; Art. 35 (3) § 60) inflation of the lists of an Insurance Committee increases its income and not its expenditure. So of course inflation grows.

If the Commissioners were able to ensure that an Insurance Committee shall honestly pay the full agreed premium for every name upon their lists, then inflation would vanish. The Insurance Commission cannot do that. If it did, Insurance Committees would not be of so much use to it in shuffling away its own responsibilities.

There being thus no doubt that the fundamental bargain has been broken, we see that in practice each modification of that bargain has been in turn consistently and systematically violated also, always by some subtle insidious scheme. Lastly, by enacting that discharged sailors and soldiers shall never drop out of benefit, while leaving the poor panel practitioner to attend to all his ills for ever for nothing.

Dr. GEOFFREY PRICE (Kineton, Warwick) writes:

1. Did we or did we not agree to 9s. per head per annum?
2. Are we getting it?
3. Why not?

We should also be receiving half fees for those insured who are at the front.

*** We can only refer Dr. Dukes and Dr. Price to the memorandum itself, and to the short article upon it published at p. 560.

POST BELLUM AGREEMENT.

Dr. A. J. CAMPBELL (Duns) writes: I cannot join Dr. Sheahan in his accusation of the British Medical Association or the Government (SUPPLEMENT, September 2nd).

Many of his questions are begged, such as:

"Do we want to have our fees paid in part eighteen months after date, while the interest obtained on them after being earned and yet unpaid is handed back to our contract patients?" The question either contains, or appears to contain, the statement that the interest is handed back to the contract patients. This is not the case. Interest on money due for medical benefit and in arrear may swell the coffers of the Treasury as of the Insurance Committee, but it cannot go to the friendly societies. The friendly societies never touch medical benefit money.

"Do we wish to have our professional conduct supervised by a local lay committee, or, as of old, by the General Medical Council?" Our professional conduct is supervised now as much as it ever was by the General Medical Council. As far as it is supervised by a local committee that supervision is exercised by a subcommittee of seven, of whom three are doctors elected by the Local Medical Committee or by the Panel Committee, of whom all the members are medical men. We have always been subject to lay supervision by parsons, squires, and ladies bountiful and unfriendly "society bosses" of many kinds.

One of his questions reads: "Are we satisfied in attending well-to-do persons for 7s. a year when the State has valued their dogs' life at 7s. 6d.?" The adverbial clause in the question has nothing to do with the matter of the principal clause. We might as well ask, "Are you satisfied in attending poor people for 7s. a year when your fair personal share of the national war expenditure is about £1 per day?"

To three of his questions I ask leave to give my answers.

1. Are we satisfied with the clerical work in connexion with the Acts? I am not. Long before the Insurance Bill was introduced I kept a record of my clinical work, short indeed but far fuller than the Act demands; that record I still keep. The Act is content with clerical work much less elaborate than the financial accounting of which it has relieved me. With this part of the change I am well satisfied.

2. Do we love the regulation which prevents an insured person paying his panel doctor a sum commensurate with the service rendered? I do. The insured person is not supposed to pay the doctor for the services rendered to him. The doctor is paid a sum contributed in part by a number of insured persons, in part by their employers and in part by the State, to give his services to those of that number of insured persons who need his services. If at the end of an attendance on any one patient he says that 7s. is the remuneration he gets for it he is inaccurate in his accounting. The regulation is meant to prevent this inaccuracy; in my opinion the regulation is not unnecessary.

3. Do we want what Dr. Greenwood calls the tyranny of writing all prescriptions in full? I do. But I think he is wrong in calling it tyranny; for (1) I think it is selfish to try to shift from our own fingers the trouble of writing what we mean, and to put on the chemist far more bother than we should be saved; and (2) I think that the repeat prescription leads to carelessness. If a prescription is written afresh it ensures at least that the doctor thinks he knows what he means. A repeat prescription does not ensure that the doctor thinks anything. The general public think it theoretically possible that some medical men may be slipshod in practice. This of course is quite a wrong idea, which I have the misfortune to share.

Dr. Sheahan's closing words are: "A self-respecting, noble, and unfettered profession." The word profession may be used as a collective or as an abstract noun. Used as a collective noun it means the same as the phrase "trade union." If we use it thus, it is not in good taste that we should prefix the adjective "noble." Self-respecting members of a trade union would not. If we use the word in the abstract sense, our profession is expressed in the Hippocratic oath for which we may humbly claim nobility. There is nothing in the Act or our agreement inconsistent with this noble profession. In neither sense is our profession unfettered; in the collective sense it is bound by etiquette, in the abstract by ethics, and these are different the one from the other.

The lines seem to have fallen to me in pleasant places. The war, not the will of the Government nor of the Insurance Committee, has hurt me, and will further hurt me, in health and pocket. But I find that my insured people treat me well. Generally they send their messages in the morning, they visit my surgery when they are fit to do so, and usually come at the hours I have set. Over and over again I have had to chide them for reluctance to cause me trouble. I have found the Insurance Committee just and considerate; at its meetings I have crossed swords vigorously with the representatives of friendly societies on matters of general rule, but in the application of rules to special cases I have found these "society bosses" very friendly to our profession in whatever sense the word is used. No attempt is made to compel me to use stock mixtures or a cheap grade of drugs. My attention is drawn to the use of proprietary medicines, but if I prescribe these they are dispensed. Dr. Alexander Fraser (Manchester) is not so fortunate, but his difficulty seems to be with the Panel Committee. This, it must be remembered, is not a "local lay committee." Dr. Fraser's letter elicits my sympathy with him, but his masters are of his own house, as Dr. Sheahan contends they ought to be.

Before I had experience of it, I was strongly and honestly opposed to the Insurance Act. If we have grievances, let us state them without exaggeration. Let us not try to rid ourselves of burdens by putting them on others: this is what the repeat prescription does. And at the present time, when the country needs our money and other men's blood, let us try not to whine.

Surcharges and Deferred Payments.

Dr. D. Roberts (Swadlincote) writes: In the report of the annual meeting of the Medical Defence Union (Supplement, October 7th, p. 98) we get a repetition of the legal aspect of the matter such as has been expressed by various authorities since the commencement of last year. I should very much like to know what a court of equity would say if the other side of the shield were presented, namely:

1. Does the administration of the Act conform with the promoter's verbal and written "prospectus" during the period of the flotation of the Act?
2. Lists are overhauled each quarter and passed as correct by Insurance Committees. This is proof of acceptance of responsibility for the payment for the numbers on such lists.
3. An authoritative circular is issued by an Insurance Committee as follows: "In Clause 6 of the agreement . . . and in the second schedule the remuneration is 1s. 7½d. and 1½d. *per head per quarter.*"
4. In statement of account we have this: "Herewith I send you cheque on general account of the amount *due* to you from my committee for the quarter ending September 30th, 1916."

I think it would carry weight at any rate if this aspect were presented.

Association Notices.

MEETING OF COUNCIL.

The next meeting of Council will be held on Wednesday, October 25th, in the Council Room, 429, Strand, London, W.C., at 11 a.m.—By order,

Guy Elliston,

Oct. 12th, 1916. *Financial Secretary and Business Manager.*

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

The following appointments are notified by the Admiralty: Fleet Surgeon J. C. G. Read to the *Thunderer*, vice Garde; Surgeon A. C. Rusack, M.B., to the *Fearless*, vice Hill; temporary Surgeons E. O. Morrison to the *Talbot*, vice Bell; J. B. Crawford, M.B., to the *Pembroke*, additional; J. A. M. Alcock, to the *Vivid*, additional, for Plymouth Hospital. To be temporary Surgeon: T. W. Robbins.

Royal Naval Volunteer Reserve.

Surgeon W. H. Bleadon, to the *Blake*, vice Blair. Surgeon Probationers J. N. Gale to the *Mastif*; W. G. Robertson to the *Meteor*; A. G. Ord to the *Forester*; A. P. Bertwistle to the *Llewellyn*; G. J. Moore to the *Hornet*; J. S. Westwater to the *Swift*. To be Surgeon Probationers: C. E. Scott, H. A. Ross, A. W. P. Haine, J. Hetherington, G. P. Waller, G. C. Thornton, E. E. Carter, R. Fletcher, G. A. Sinclair, J. P. McMillan, F. McDonald, W. L. Balfour.

ARMY MEDICAL SERVICE.

Temporary Colonel W. V. Low, C.B., M.D., F.R.C.S. (Captain R.A.M.C.T.F.), relinquishes his temporary commission.

Temporary Colonel H. A. Thomson, C.M.G., M.D., F.R.C.S.E. (Captain R.A.M.C.T.F.), relinquishes his temporary commission.

Royal Army Medical Corps.

Major (temporary Lieutenant-Colonel) F. S. Irvine, D.S.O., M.B., to be Lieutenant-Colonel, vice Lieutenant-Colonel A. Kennedy, promoted.

Major E. E. E. Powell, from supernumerary list, to be Lieutenant-Colonel, vice Lieutenant-Colonel J. S. Green, placed on retired pay. (Substituted for notification in the *London Gazette* of September 28th.)

Majors to be temporary Lieutenant-Colonels whilst in command of stationary hospitals: N. E. J. Harding, M.B., J. R. McMunn, C.M.G., W. L. Steele, J. H. Campbell, D.S.O., W. J. Taylor, M.B., M. Boyle, M.B., A. E. Smithson, M.B., J. W. H. Houghton, M.B., A. R. Greenwood, R. L. V. Foster, M.B., S. W. M. Meadows, C. R. L. Ronayne, M.B., W. J. P. Adye-Curran, A. J. Hull, F.R.C.S., A. W. Gater, P. J. Marett, D. L. Harding, G. G. Tabuteau, H. C. Sidgwick, M.B.

Majors to be temporary Lieutenant-Colonels whilst in command of field ambulances: H. B. Connell, H. Stewart, M.B., E. B. Knox, M.D. (Substituted for notice in the *London Gazette* of March 18th, 1916.)

Temporary Majors to be temporary Lieutenant-Colonels whilst in command of field ambulances: E. L. Gowlland, M.B., W. B. Edwards.

The undermentioned are granted temporary rank whilst employed at the Manor (County of London) War Hospital. As Lieutenant-Colonel: W. I. Donaldson, M.D. As Major: S. C. Elgee.

Majors to be temporary Lieutenant-Colonels whilst in command of casualty clearing stations: H. Rogers, M.B., J. W. Leake, C.M.G., S. L. Pallant, A. W. Gibson, H. T. Wilson, D.S.O., C. D. Myles, M.B., W. R. P. Goodwin, R. J. Cahill, M.B., W. Benson, M.B., R. J. C. Thompson, D.S.O., J. M. B. Rahilly, M.B., R. B. Hole, M.B., A. E. Hamerton, D.S.O.

Majors to be temporary Lieutenant-Colonels whilst in command of field ambulances: M. MacG. Rattray, M.B., E. C. Hayes, S. A. Archer, J. H. R. Winder, M.D., E. W. Bliss, R. P. Lewis, R. A. Bryden, M. J. Cromie, W. Bennett, M.B., A. J. Williamson, M.B., R. C. Wilmot, G. J. Houghton, H. W. Long, M.B., R. J. C. Thompson, D.S.O., F. E. Rowan-Robinson, M.B., R. N. Hunt, M.B., N. E. Dunkerton, J. Matthews, D. Ahern, C. W. Holden, T. J. Wright, H. C. Hildreth, F.R.C.S., G. E. Ferguson, B. B. Burke, D.S.O., G. A. Kempthorne, T. E. Hardy.

Captains to be temporary Majors whilst in command of field ambulances: G. P. Taylor, M.B., D. T. MacCarthy, M.B., G. B. Edwards, A. D. O'Carroll, M.B., G. H. Stevenson, M.B., P. S. Tomlinson, B. Johnson, M.B., W. J. E. Bell, D.S.O., M.B., E. J. Kavanagh, M.B., C. R. M. Morris, M.B., F. H. Bradley, M.B., E. D. Cadell, M.B., D. F. Mackenzie, M.B., W. H. Forsyth, M.B., F. L. Bradish, R. Hemphill, M.B., W. B. Purdon, M.B., G. T. Rudkin, P. G. M. Elvery, H. Gibson, T. B. Nicholls, M.B., T. S. Eves, M.B., J. D. Bowie, M.B.

Temporary Captain F. G. W. Deane, F.R.C.S.E., to be temporary Major whilst in charge of the Springburn and Woodside War Hospital.

Captain (temporary Major) V. C. Honeybourne relinquishes his temporary rank on reposting.

Captain J. A. Manifold, M.B., to be temporary Major whilst in command of a stationary hospital.

Temporary Captains to be temporary Majors whilst in command of field ambulances: C. V. Bulstrode, J. R. C. Greenlees, D.S.O., M.B.

Temporary Captain K. F. Sonntag, M.B., relinquishes his commission on account of ill health (substituted for notification in the *London Gazette* of August 29th, 1916).

To be temporary Captains: S. K. Adams, M.B., late Captain Army Medical Reserve, T. Redmayne, M.B., F.R.C.S., H. Fraser, M.D.

Temporary Captain A. M. Fisher, M.D., relinquishes his commission on account of ill health (substituted for notification in the *London Gazette* of September 18th, 1916).

Temporary Captains relinquish their commissions: H. J. Hutchens, A. G. Mossop, G. M. W. Hodges, M.B., A. D. Haydon, P. Northcote, M.B., T. G. Moorhead, M.D., F.R.C.P.

Lieutenant R. L. Williams, from Welsh Regiment (T.F.) to be temporary Lieutenant (substituted for notification in the *London Gazette* of September 18th, 1916).

Temporary Lieutenants to be temporary Captains: J. Pirie, M.D., F. McE. Sinclair, M.B., W. J. Hicks, M.B., J. W. Riddock, M.B., A. L. Badcock, M.B., D. A. Evans, J. C. Hindley, M.B., J. S. Gilchrist, M.B., J. D. Watson, M.B., J. M. Macfie, M.B., W. G. D. McCall, J. V. Grant, M.B., W. Cunningham, M.B., J. A. Leiper, M.B., P. C. Davie, M.B., J. C. Knox, M.B., F. G. Cross, F.R.C.S., T. H. Sarsfield, N. B. Laughton, M.B., F. R. Sturridge, J. P. Lusk, M.B., H. R. W. Husbands, J. T. Mackenzie, T. J. Gilmore, M.B., M. S. Bryce, M.B., J. Campbell, M.B., C. C. B. Gilmour, M.B., D. M. R. Crighton, M.B., R. F. Linton, M.B., A. L. Anderson, M.D., F. J. Hathaway, M.D., G. B. McTavish, M.D., G. Walker, M.D., A. W. P. Todd, M.B., A. H. Coleman, M.B., T. Pretsell, M.B., J. Beatty, M.D., G. F. Gill, T. J. Buckley, M.B., J. C. Boyd, M.D., J. M. McKie, M.B., E. J. Storer, L. C. Martin, M. Sommerville, M.B., J. S. Findlay, P. C. Litchfield, J. Watson, M.B., R. A. Fuller, J. Philp, E. G. B. Calvert, M.B., P. Sturrock, J. E. Taylor, J. B. Thackeray, A. G. Winter, H. H. Mathias, L. M. Ingle, J. A. Liley, M.C., J. L. Graham-Jones, M.B., H. P. Newsholme, M.D., J. K. Morton, M.B., V. G. Williams, M.D., G. Marshall, M.B., R. L. Norman, F. L. Pelly, M.B., H. J. Bell, T. F. Shackleton, C. G. A. Chislett, M.B., G. F. Oldershaw, M.D., W. Shanks, M.B., G. O. Connell, F. W. Joynes, F. J. Kirknees, M.B., A. G. Mowat, M.B., A. A. Miller, M.D., H. P. Crampton, M.D., R. W. Shegog, M.B., J. F. Hoare, A. C. T. Woodward, M.B., F.R.C.S., J. L. Hendry, G. W. Charsley, M.B., W. Fairclough, M.B., W. B. Thompson, M.B., T. B. Riddall, M.B., J. R. Dobbin, M.B., J. MacKinnon, M.B., C. C. Irvine, L. M. Rowlette, D.S.O., C. S. Van R. Harwood, M.B., J. D. O'Connor, M.B., A. G. Naismith, M.B., E. G. Fenton, F.R.C.S.I., R. L. Ley, M.B., O. J. N. Muriset, M.B., T. Kelly, S. Bryson, M.B., H. J. Flanigan, F.R.C.S.I., W. W. Uttley, M.B., G. H. Powell, M. Davidson, M.D., J. F. Buller, M.B., F.R.C.S., G. M. Grant, M.B., C. S. Pantin, M.D., F.R.C.S., W. H. Best, J. M. Anderson, M.B., W. Warburton, M.B., A. Stodart-Walker, M.B., F.R.C.P., C. M. Stubbs, M.B., G. F. Fawn, B. Park, M.D., W. N. Gilmour, M.D., A. E. Huckett, M.B., F. G. Martin, W. Core, M.B., J. H. C. Gatchell, E. T. Jones, F. B. Manser, M.B., J. E. McCartney, M.B., W. E. A. Buchanan, M.B., R. P. Kennedy, R. J. Aherne, R. N. Farrer, W. Herbertson, M.B., E. W. Craig, M.B., A. H. Murch, M.B., E. C. Mackay, M.D., A. S. Hendrie, M.B., A. G. Hamilton, M.D., F.R.C.S.E., P. Gettleson, M.D., J. Joule, R. J. Cane, W. Stanwell, D. J. McAfee, M.B., G. Coates, E. G. Evans, F. R. Snell, M.B., R. Felton, M.D., E. Brown, V. M. Fisher, M.B., W. Millerick, D. F. Macdonald, M.B., R. A. Fawcus, M.B., S. R. Lane, M.D., G. L. Parsons, F. Dillon, M.B., O. A. Beaumont, W. A. Clayton, A. Macintyre, M.B., W. G. Macdonald, M.B., G. W. Riddel, M.B., F. N. Brown, N. F. Lock, M.B., F.R.C.S., H. Young, M.B., L. R. Thomson, M.B., B. A. Cheadle, M.B., C. E. Meryon, G. G. Bruce, M.B., J. G. Castellain, A. C. West, M.B., J. G. S. Mennie, M.B., M. B. Lindsey, F. C. Plummer, M.B., A. B. MacLean, M.B., B. C. Scott, R. B. John, D. Dunlop, M.B., M. G. Dobbyn, F.R.C.S.I., E. V. Frederick, M.B., W. J. M. Marcy, J. W. Littlejohn, M.D., W. R. W. Aspien, M.B., A. Brown, M.B., D. Fisher, M.B., W. T. Finlayson (from unattached list), R. C. McQueen, M.B., F.R.C.S., A. H. Style, M.D.

To be temporary Lieutenants: Lieutenants S. G. Kean, M.D., W. S. Wallace, R. H. Thomas, and G. H. Ensing, Canadian A.M.C.; D. E. Scott, M.D., C. M. Keillor, M.D., T. E. R. Branch, M.B., R. W. S. Christmas, G. L. Crimp, M.B., W. J. H. Hepworth, F. H. Wolfe, J. Longworth, M.B., R. S. Kennedy, J. C. Nixon, M.B., J. F. Elliott, R. W. S. Walker, M.D., J. L. Gregory, M.B.; temporary honorary Lieutenants W. Farquharson and A. R. Fuller; L. H. Taylor, M.B., P. C. E. d'Erf Wheeler, M.D., F.R.C.S.E., J. W. Turner, W. Arnott, M.B., J. F. Carroll, M.B., A. C. B. Biggs, F. Rogerson, M.B., F. W. Waterworth, M.B., A. L. Home, M.B., F.R.C.S., G. Fleming, M.B., F. W. M. Palmer, M.D., C. H. L. Rixon, J. G. Fraser, M.B., L. Bathurst, E. A. W. English, M.B. C. Murphy, M.B., J. MacC. Gibson, M.B., A. Binning, M.D., A. T. Cooper, A. I. Miller, M.B., E. G. D. Menzies, M.B., J. Robertson, M.B., R. Edwards, M.B., G. J. Meldon, M.D., F. S. Poole, J. J. Harty, F.R.C.S.I., G. H. Randolph, E. H. Drake, P. C. C. Smith, M.D., W. S. Darby, M.B., C. E. A. Wilson, M.B., R. J. B. Leney. A. B. Rendel, M.B., A. Reid, M.B., C. W. Emlyn, A. Boothroyd, M.B., C. A. Birts, M.B., R. J. Harley-Mason, J. B. Cook, M.D., H. H. Weir, M.B., W. C. Sharpe, M.D., A. J. Kearney, J. R. Thompson, M.B., T. W. Pattinson, W. Lessey, M.D., H. Blyth, M.B., J. B. Wall, E. A. C. Beard, M.B., R. B. Martin, A. J. McNair, M.B., A. B. Lindsay, M.D., B. B. Sapwell, jun., M.B., W. E. Glover, M.B., K. W. D. MacRae, M.B., H. T. Evans, M.D., W. Brennan, W. W. Dempster, G. Saporti, M.D., J. Leach, M.B., Temporary honorary Lieutenant R. Curle, J. Robertson, M.B., H. W. Whitehouse, M.D., C. E. O'Keefe, J. C. Murray.

The notifications in the *London Gazette* of June 10th and 12th, 1916, regarding temporary Lieutenants E. V. Frederick, M.B., and W. J. M. Macy, respectively, are cancelled.

Temporary Captain W. Templeman, M.D., and temporary Lieutenant A. C. Johnston relinquish their commissions on account of ill health.

The surname of temporary Lieutenant Thomas E. Mulvany is as now described and not as in the *London Gazette* of October 16th, 1915.

Lieutenants of the Canadian A.M.C. to be temporary Lieutenants: B. O. Kinney, G. L. Gall, M.D., C. M. Anderson, M.D., F. G. Pedley, M.D., W. C. Brown, M. A. Harrington, M.B., J. W. MacKie, M.B., F. J. Colling, M.B.

J. McMurray to be temporary Lieutenant whilst employed with the Cape Labour Corps.

Temporary honorary Lieutenant W. E. Coe to be temporary honorary Captain whilst employed with the St. John Ambulance Brigade Hospital.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

Wessex Casualty Clearing Station. Lieutenant C. A. Raison, M.B., to be Captain; Lieutenant A. C. Smith, from London Field Ambulance, to be Lieutenant.

Welsh Border Mounted Brigade Field Ambulance.—Lieutenant J. Derham Reid, to be Captain.

Home Counties Field Ambulance.—Captain C. E. M. Hey relinquishes his commission on account of ill health. To be Captains: Captains J. R. Chalmers, M.B., from T.F.R., and A. E. Huxtable, from Wessex Casualty Clearing Station.

London Sanitary Company.—Lieutenants to be Captains: J. A. Andrewes, A. E. Jury.

South Midland Field Ambulance.—Major F. J. Warwick, M.B., from T. F. Reserve, to be Major (substituted for announcement in the *London Gazette* of June 21st, 1916).

Northumbrian Field Ambulance.—H. Evers, M.B., to be Lieutenant.

West Lancashire Field Ambulance.—Major R. Coffey to be temporary Lieutenant-Colonel whilst commanding a field ambulance.

Attached to Units other than Medical Units.—R. E. Pitts to be Lieutenant.

Vacancies and Appointments.

NOTICES REGARDING APPOINTMENTS.—Attention is called to a Notice (see Index to Advertisements—Important Notice re Appointments) appearing in our advertisement columns, giving particulars of vacancies as to which inquiries should be made before application.

VACANCIES.

BRISTOL ROYAL INFIRMARY. — House-Physican. Salary, £120 per annum.

CAMBRIDGESHIRE ASYLUM, Fulbourn.—Junior Assistant Medical Officer. Salary, £200 per annum, increasing to £250.

CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL. — Second House Surgeon. Salary, £150 per annum.

COLCHESTER; ESSEX COUNTY HOSPITAL —House-Surgeon.

DUDLEY: GUEST HOSPITAL.—(1) Senior Resident Medical Officer. (2) Assistant House-Surgeon. Salary, £150 and £120 per annum respectively.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark, S.E.— —House-Physician. Salary, £160 per annum.

HÔPITAL FRANÇAIS, Shaftesbury Avenue, W.C.—Surgeon to the Throat, Nose and Ear Department.

HUDDERSFIELD COUNTY BOROUGH.—Assistant School Medical Officer. Salary, £300 per annum.

HULL: CITY AND COUNTY OF KINGSTON-UPON-HULL.— Resident Medical Officer for the Infectious Diseases Hospital.

ITALIAN HOSPITAL, Queen Square, W.C.—House-Surgeon. Salary, £80 per annum.

LABORATORIES OF PATHOLOGY AND PUBLIC HEALTH, 38, New Cavendish Street, W.—Bacteriologist

LITTLE BROMWICH FEVER HOSPITAL, Birmingham.—Lady Assistant Medical Officer. Salary, £300 per annum, rising to £350.

LONDON LOCK HOSPITAL, Dean Street, W.—House-Surgeon. Salary, £150 per annum.

MANCHESTER ROYAL EYE HOSPITAL.—House-Surgeon. Salary, £120 per annum.

MANCHESTER ROYAL INFIRMARY.—Resident Medical Officer at the Convalescent Hospital, Cheadle. Salary, £225 per annum.

NEWCASTLE-UPON-TYNE: ROYAL VICTORIA INFIRMARY.—(1) Four House-Physicians. (2) Four House-Surgeons. (3) Accident Room House-Surgeon. (4) House-Surgeons to departments (*a*) Aural and Ophthalmic; (*b*) Skin and Gynaecological; (*c*) Out-patient Dressing

NOTTINGHAM GENERAL HOSPITAL.—(1) Two House-Physicians. (2) Assistant House Surgeon. Salary, £250 per annum each.

PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL. —Assistant in the *X*-Ray and Finsen Light Department.

QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Marylebone Road, N.W.—Assistant Resident Medical Officer. Salary £60, rising to £80 on appointment as Senior.

RHONDDA URBAN DISTRICT COUNCIL. — Assistant Medical Officer of Health and School Medical Officer. Salary, £350 per annum.

ROCHDALE INFIRMARY AND DISPENSARY.—Second House-Surgeon. Salary, £150 per annum.

SCOTTISH WOMEN'S HOSPITALS.—Medical Women and Radiographer Women for Serbian Unit in Russia. Honorarium, £200 per annum.

SHEFFIELD ROYAL INFIRMARY.—Two Resident Medical Officers. Salary, £100 per annum.

SOUTH LONDON HOSPITAL FOR WOMEN, Clapham Common, S.W.—(1) Temporary Assistant Physician to the Children's Department. (2) House-Physician. (3) House-Surgeon. Salary at the rate of £100 per annum for (2) and (3).

WALSALL AND DISTRICT HOSPITAL.—Assistant House-Surgeon and Anaesthetist. Salary, £150 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces the following vacant appointment: Clacton-on-Sea (Essex).

To ensure notice in this column—which is compiled from our advertisement columns, where full particulars will be found—it is necessary that advertisements should be received not later than the first post on Wednesday morning. Persons interested should refer also to the Index to Advertisements which follows the Table of Contents in the JOURNAL.

APPOINTMENTS.

SLATTERY, J. B., M.D., R.U.I., District and Workhouse Medical Officer of the Bishop Stortford Union.

EDINBURGH ROYAL INFIRMARY.—The following appointments have been made:—Resident Physicians: James M. Tyrrel (final year student), to Sir R. W. Philip; A. L. M'Ilwaine (final year student), to Professor Russell; R. P. R. Galloway (final year student), to Professor Gulland; J. M. Norman (final year student), to Dr. Harry Rainy; C. R. C. Moon (final year student), to Dr. Chalmers Watson. Resident Surgeons: R. W. N. Miller, M.B., Ch.B., to Professor Alexis Thomson; C. Witherington Stump (final year student), to Mr. Miles; H. P. Winsbury White, M.B., Ch.B., to Mr. Dowden: J. Arthur Hadfield (final year student), to Mr. Jardine, S.O.P.D.; J. Laurie Lamont (final year student), to Mr. Jardine, S.O.P.D.: W. Richard Mathewson (final year student), to Dr. A. H. F. Barbour. Clinical Assistants: W. T. Garretson, M.D., to Dr. Logan Turner; E. R. Holborow, M.B., B.S., to Dr. Logan Turner.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is **5s.**, *which sum should be forwarded with the notice not later than the first post on Wednesday morning in order to ensure insertion in the current issue.*

DEATHS.

BREW.—On October 12th, at Rouen, from wounds received in action, September 15th, Cyril Huleatt, Lieutenant Irish Guards, younger son of Dr. and Mrs Brew, Chew Magna, aged 22.

GARNER.—On the 16th inst., at 225, Mary Street, Balsall Heath, Birmingham, John Garner, M.R.C.S., L.S.A., in his 81st year.

HICKMAN.—On the 16th inst., at "The Hollies," Wanstead, Herbert Vigers Hickman, M.B.Lond., aged 54.

WATERS.—On the 14th inst., at 107, Dorset Road, Bexhill-on-Sea, Avery Clough Waters, M.B., J.P., late of Whitegates, Southend-on-Sea, aged 54 years. Interred on Thursday at 2.15 at Sutton Church, near Southend-on-Sea.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, W., 8.30 p.m.—Demonstration of Cases illustrating Orthopaedic Principles and Methods in Military Surgery by Mr. D. McCrae Aitken, F.R.C.S.

WEDNESDAY.

ROYAL SOCIETY OF MEDICINE:
SECTION OF HISTORY OF MEDICINE, 5 p.m.—Presidential Address by Dr. Raymond Crawfurd on Legends and Lore of the Genesis of the Healing Art.

THURSDAY.

ROYAL SOCIETY OF MEDICINE:
SECTION OF NEUROLOGY, 8.30 p.m.—Presidential Address by Professor W. D. Halliburton, F.R.S., on The Possible Functions of the Cerebro-spinal Fluid.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:
SECTION OF STUDY OF DISEASE IN CHILDREN, 4.30 p.m.—Cases.
SECTION OF EPIDEMIOLOGY AND STATE MEDICINE, 8.30 p.m.—Captain C. G. Moor: Work of a Sanitary Section at a Base.

DIARY OF THE ASSOCIATION.

Date.		Meetings to be Held.
		OCTOBER.
20	Fri.	London: Central Medical War Committee, 2 p.m.
25	Wed.	London: Council Meeting, 11 a.m.

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